PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/524,948			ing Date 18/2005	To be Mailed
APPLICATION AS FILED – PART I OTHER THAN (Column 1) (Column 2) SMALL ENTITY □ OR SMALL ENTITY												
Н	FOR	NU	NUMBER FILED		NUMBER EXTRA			RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A			N/A		1	N/A	
	SEARCH FEE (37 CFR 1.16(k), (i),	or (m))	N/A		N/A			N/A			N/A	
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A		N/A			N/A			N/A	
	FAL CLAIMS CFR 1.16(i))		minus 20 =					x \$ =		OR	x s =	
IND (37	EPENDENT CLAIM CFR 1.16(h))	s	m	minus 3 = *				x \$ =		1	x \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE sheet is \$25 additi	If the specification and dra- sheets of paper, the applic is \$250 (\$125 for small ent additional 50 sheets or frac 35 U.S.C. 41(a)(1)(G) and			n size fee due for each n thereof. See						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))												
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL]	TOTAL	
APPLICATION AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY												
AMENDMENT	04/14/2008	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	· 13	Minus	** 20		= 0		x \$ =		OR	X \$50=	0
	Independent (37 CFR 1.16(h))	• 2	Minus	3		= 0		x \$ =		OR	X \$210=	0
	Application Size Fee (37 CFR 1.16(s))											
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR		
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)												
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16(i))		Minus			=		x \$ =		OR	x s =	
	Independent (37 CFR 1,16(h))		Minus	***				x \$ =		OR	x s =	
핇	Application Size Fee (37 CFR 1.16(s))]		
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR		
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For "N THIS SPACE is less than 20, enter "20". ** If the "Highest Number Previously Paid For "N THIS SPACE is less than 3, enter "3". **The "Highest Number Previously Paid For "(Total or independent) is the highest number found in the appropriate box in column 1.												

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